STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

40. 07 COPIES RECE	WED	
DISTRIBUTION		
BANTA FE		
PILE		
U.S.O.S.		
LAND OFFICE		
TRANSPORTER	OIL	Ш
	BAS	
OPERATOR		
PRORATION OFFICE		

OIL CONSERVATION DIVISION P.O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 **Revised 10-01-78** NOV 3 0 1987

Separate Forms C-104 must be filed for each pool in multiply completed wells.

REQUEST FOR ALLOWABLE AND

OIL CON. DIV

PROBATION OFFICE AUTHORIZATION TO TRANSP	DIST. 3		
Operator			
TENNECO OIL COMPANY			
P.O. BOX 3249, ENGLEWOOD, COLORADO 8	30155		
Respon(s) for filling (Check proper box)	Other (Please explain)		
New Well Change in Transporter of:	Change in Transporter		
Recompletion Oil Dry Gas	Effective 12-01-87		
Change in Ownership Casinghead Gas A Condensate			
If change of ownership give name and address of previous owner			
II. DESCRIPTION OF WELL AND LEASE	ion Kind of Lease Lease No.		
Howell 1A Blanco MV	State, Federal or Fee Fed SF - 078578		
Location			
I 1850	S Line and 1105 Feet From The E		
UM Silvi			
Line of Section 20 Township 30N	Plange 811 , NMPM, San Juan county		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil 🗇 or Condensate 💢	Address (Give address to which approved copy of this form is to be sent)		
CONOCO	P.O. BOX 460 HOBBS, NM 88240 Address (Give address to which approved copy of this form is to be sent)		
Name of Authorized Transporter of Casingheed Gas ロ or Dry Gas 又			
SUNTERRA GAS GATHERING TWO PAGE	P.O. BOX 1899 BLOOMFIELD. NM 87413		
If well produces oil or liquids. T 20 30N 8W	*		
Ove location or rawa			
If this production is occurringled with that from any other lease or pool, give commingling order number.			
NOTE: Complete Parts IV and V on reverse side if necessary.			
VI. CERTIFICATE OF COMPLIANCE			
VI. CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied	APPROVED, 19,		
with and that the information given is true and complete to the best of my knowledge and belief.	るい!		
<u>_</u>	BY		
SUPERVISION DISTRICT # 3			
MI OSAMAN .	This form is to be filed in compliance with RULE 1104.		
Michael D. Gammen	If this is a request for allowable for a newly drilled or deepened well, this form must be accom-		
Senior Administrative Analyst All sections of this form must be filled out completely for allowable on new and recompleted w			
(Title)	Fill out only Section 1, II, III, and VI for changes of owner, well name and or number, or transporter		
November 25. 1987	or other such change of condition. Separate Forms C-104 must be fixed for each pool in multiply completed wells.		